



Évaluation des pratiques de l'injonction de soins : étude sur 119 sujets

Submitted by Stéphanie Pinot on Wed, 06/05/2019 - 15:23

Titre	Évaluation des pratiques de l'injonction de soins : étude sur 119 sujets
Type de publication	Article de revue
Auteur	Bernard, Julie [1], Le Gal, Dewi [2], Brugallé, J [3], Gohier, Bénédicte [4], Orsat, Manuel [5]
Editeur	Elsevier
Type	Article scientifique dans une revue à comité de lecture
Année	2019
Langue	Français
Date	5 Avril 2019
Numéro	4
Pagination	297-303
Volume	45
Titre de la revue	Encephale
ISSN	0013-7006
Mots-clés	Auteur d'infraction sexuelle [6], Criminologie [7], Criminology [8], Dangersité [9], Dangerousness [10], Forensic psychiatry [11], Injonction de soins [12], Injunction to care [13], Psychiatrie médico-légale [14], Psychiatry disorders [15], Sexual offender [16], Troubles psychiatriques [17]

Résumé en
anglais

INTRODUCTION: The injunction to care (IC) is a new compulsory treatment created by the Act of June 17, 1998. Initially, this judicial tool concerned mainly sex offenders, but then the number of overall crimes requiring an IC began to dramatically rise. The judge can order this measure only if a psychiatric expertise has concluded to its potential opportunity. Then the convict must undergo a psychiatric follow-up after having served the sentence. The creation of a court-ordered treatment is based on the premise that many offenders are affected by psychiatric disorders. For the lawmaker, the aim is to lower the risk of recidivism.

PURPOSES: The main purpose of this study is to assess the convicts concerned by the IC describing their sociodemographic characteristics, psychiatric diagnostics and criminal characteristics. The second purpose is to assess the efficiency of this measure regarding re-offending and specifically legal recidivism.

METHODS: This is a retrospective and descriptive study concerning 119 subjects followed-up by two "coordinating doctors" in the department of Sarthe who could assess their psychiatric diagnostics and sociodemographic characteristics. They could also compare medical data with the judicial data for 78 of the subjects.

RESULTS: The population was composed of 117 men (98.3%) aged 45 years old on average. They had a job in 37% of cases (n=44) and were single in 56.3% of cases (n=67). According to the DSM-IV-TR, only 29 subjects (24.4%) had an axis I disorder and 37.8% of the population had a pathological personality trait (non DSM-IV-TR categorized disorder). Furthermore, 51.3% (n=61) of the subjects were addicted (mainly alcohol). The medical follow-up was carried out by a psychiatrist in 83.2% of cases (n=99). The average duration of follow-up was five years. Among the 78 subjects for whom there was access to juridical data, 13 (16.7%) had committed a new offense during follow-up. Among them, seven had recidivated six of whom were initially sentenced for sexual offense.

CONCLUSIONS: Most of the subjects in injunction to care had no axis I disorder but addictions and/or pathological personality traits. Nevertheless, the expert concluded the need of an IC. Personality and behavior disorders do not always require psychiatric care, and the management must be multidisciplinary. In France, the psychiatrist remains at the center of injunction to care measure. The addictology care is not developed whereas it is a population at risk and there is a lack of interactions between professionals (medical, social and judicial professionals). The IC is a measure that needs to be improved by means of better communication among the different professionals and a better global assessment of the subjects. Medical care must be a possible option but not a systematic treatment.

URL de la notice	http://okina.univ-angers.fr/publications/ua19722 [18]
DOI	10.1016/j.encep.2019.01.004 [19]
Lien vers le document	Évaluation des pratiques de l'injonction de soins : étude sur 119 sujets
Autre titre	Encephale
Titre traduit	Evaluation of injunction to care practices: A study of 119 cases
Identifiant (ID) PubMed	30961972 [20]

Liens

- [1] <http://okina.univ-angers.fr/publications?f%5Bauthor%5D=37547>
- [2] <http://okina.univ-angers.fr/publications?f%5Bauthor%5D=37548>
- [3] <http://okina.univ-angers.fr/publications?f%5Bauthor%5D=37434>
- [4] <http://okina.univ-angers.fr/benedicte.gohier/publications>

- [5] <http://okina.univ-angers.fr/publications?f%5Bauthor%5D=17884>
- [6] <http://okina.univ-angers.fr/publications?f%5Bkeyword%5D=28520>
- [7] <http://okina.univ-angers.fr/publications?f%5Bkeyword%5D=28521>
- [8] <http://okina.univ-angers.fr/publications?f%5Bkeyword%5D=28527>
- [9] <http://okina.univ-angers.fr/publications?f%5Bkeyword%5D=28519>
- [10] <http://okina.univ-angers.fr/publications?f%5Bkeyword%5D=28526>
- [11] <http://okina.univ-angers.fr/publications?f%5Bkeyword%5D=28524>
- [12] <http://okina.univ-angers.fr/publications?f%5Bkeyword%5D=28517>
- [13] <http://okina.univ-angers.fr/publications?f%5Bkeyword%5D=28523>
- [14] <http://okina.univ-angers.fr/publications?f%5Bkeyword%5D=28518>
- [15] <http://okina.univ-angers.fr/publications?f%5Bkeyword%5D=28528>
- [16] <http://okina.univ-angers.fr/publications?f%5Bkeyword%5D=28525>
- [17] <http://okina.univ-angers.fr/publications?f%5Bkeyword%5D=28522>
- [18] <http://okina.univ-angers.fr/publications/ua19722>
- [19] <http://dx.doi.org/10.1016/j.encep.2019.01.004>
- [20] <http://www.ncbi.nlm.nih.gov/pubmed/30961972?dopt=Abstract>

Publié sur *Okina* (<http://okina.univ-angers.fr>)